IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF OHIO

K. Bowman

Woodrow 1	Wolfe	1:25-cv-330
(ENTER ABOVE THE	E NAME OF THE PLAINTIFF IN THIS ACTION)	Judge Michael R. Barrett
IF THE PLAINTIFF IS	S A PRISONER: PRISONER # 49-550	Magistrate Judge Stephanie
	vs.	
CIA		
(ENTER ABOVE THE	E NAME OF THE DEFENDANT IN THIS ACTION)	-
IF THERE ARE ADDI	ITIONAL DEFENDANTS PLEASE LIST THEM:	
14 1 - 14 - 15 3/4 - 160 3/17 5/19		
	COMPLAINT	
I. PARTIES TO	THE ACTION:	
PLAINTIFF:	PLACE YOUR NAME AND ADDRESS ON THE LEADDRESS YOU GIVE MUST BE THE ADDRESS TO YOU AND MAIL DOCUMENTS TO YOU NUMBER IS REQUIRED.	THAT THE COURT MAY
	Woodrow Wolfe	
	NAME - FULL NAME PLEASE - PRINT	
	5787 St. Rt 63, Lebanon, ohi	0,45036
	ADDRESS: STREET, CITY, STATE AND ZIP COD	
	Λ// Δ	
	TELEPHONE NUMBER	

IF THERE ARE ADDITIONAL PLAINTIFFS IN THIS SUIT, A SEPARATE PIECE OF PAPER SHOULD BE ATTACHED IMMEDIATELY BEHIND THIS PAGE WITH THEIR FULL NAMES, ADDRESSES AND TELEPHONE NUMBERS. IF NO ADDITIONAL PLAINTIFFS EXIST CONTINUE WITH THIS FORM.

PAGE 2 AND 3 OF THIS FORM DEAL ONLY WITH A PLAINTIFF THAT IS INCARCERATED AT THE TIME OF FILING THIS COMPLAINT.

IF 486: Ari 25 FK 1868 28 MERCS X EN PLOS HITS THE 46 LLT WILL THE FOLLY WILL THE SECOND HIS 62 REQUIRED:

PREVIOUS LAWSUITS:

- A. HAVE YOU BEGUN OTHER LAWSUITS IN STATE OR FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION OR OTHERWISE RELATING TO YOUR IMPRISONMENT? YES () NO (*)
- B. IF YOUR ANSWER TO A IS YES, DESCRIBE THE LAWSUIT IN THE SPACE BELOW. (IF THERE IS MORE THAN ONE LAWSUIT, DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THE SAME OUTLINE.)

1.	PARTIES TO THIS PREVIOUS LAWSUIT		
	PLAINTIFFS:		
	N/A		
	DEFENDANTS:		
	N/A		
	1		
2.	COURT (IF FEDERAL COURT, NAME THE DISTRICT: IF STATE COURT , NAME THE COUNTY)		
	N/A		
3.	DOCKET NUMBER		
	N/A		
4.	NAME OF THE JUDGE TO WHOM THE CASE WAS ASSIGNED		
	N/A		
5.	DISPOSITION (FOR EXAMPLE, WAS THE CASE DISMISSED? WAS IT		
٥.	APPEALED? IS IT STILL PENDING?)		
	N/A		
6.	APPROXIMATE DATE OF THE FILING OF THE LAWSUIT		
	N/A		
7	APPROXIMATE DATE OF THE DISPOSITION		
7.	A / / A		
	N/A		

A.	IS THERE A PRISONER GRIEVANCE PROCEDURE IN THIS INSTITUTION? YES (4) NO ()	
B.	DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT IN THIS STATE PRISONER GRIEVANCE PROCEDURE? YES (*) NO ()	
C.	IF YOUR ANSWER IS YES:	
	1. WHAT STEPS DID YOU TAKE?	
	The prisoner Grievance procedure	
	2. WHAT WAS THE RESULT?	
	They told me they would punish	
	They told me they would punish me if I Keep writing it up!	
D.	IF YOUR ANSWER IS NO, EXPLAIN WHY NOT.	
E.	IF THERE IS NO PRISON GRIEVANCE PROCEDURE IN THIS INSTITUTION, DID YOU COMPLAIN TO PRISON AUTHORITIES? YES (*) NO ()	
F.	IF YOUR ANSWER IS YES:	
	1. WHAT STEPS DID YOU TAKE?	
	Kites, The prisoner Grievance Procedure,	
	I Complained to Medical.	
	2. WHAT WAS THE RESULT?	
	They tried to punish me for seeking help. By they I mean the Investigator	

Case: 1:25-cv-00330-MRB-SKB Doc #: 5 Filed: 07/17/25 Page: 4 of 6 PAGEID #: 64 DEFENDANTS:

PLACE THE NAME AND ADDRESS OF EACH DEFENDANT YOU LISTED IN THE CAPTION ON THE FIRST PAGE OF THIS COMPLAINT. THIS FORM IS INVALID UNLESS EACH DEFENDANT APPEARS WITH FULL ADDRESS FOR PROPER SERVICE.

IF THERE ARE ADDITIONAL DEFENDANTS, PLEASE CONTINUE LISTING THEM.

PLEASE WRITE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE. DESCRIBE HOW EACH DEFENDANT IS INVOLVED. INCLUDE THE NAME OF ALL PERSONS INVOLVED. GIVE DATES AND PLACES.

DO NOT GIVE ANY LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES.

IF YOU HAVE A NUMBER OF DIFFERENT CLAIMS; PLEASE NUMBER AND SET FORTH EACH CLAIM IN A SEPARATE PARAGRAPH. USE AS MUCH SPACE AS YOU NEED. YOU ARE NOT LIMITED TO THE PAPERS WE GIVE YOU. ATTACH EXTRA SHEETS THAT DEAL WITH YOUR STATEMENT CLAIM IMMEDIATELY BEHIND THIS PIECE OF PAPER.

Bezzarro When on 6-1-21 0.0 was 17 neocc Report getting me raped. I heard the Prea refused about it so I Cell. Shortly after that they to Shut me up. I started telling and now OA Kill me involved and they Said Knowing how Confirm Beacon inside Bot! I have a Beacon" now head just Mysel Wanted until I breath Breath. tells My me hold withour inside Brain helP.I and Seeking am not mental understand very Sane Well and am danger Beacon on 1125,1 am demanding OW else They Preg Calls and 25, al anythi

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IN THIS SECTION PLEASE STATE (WRITE) BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENT, CITE NO CASES OR STATUTES.
DO FOR YOU. MAKE NO LEGAL ARGUMENT, CITE NO CASES OR STATUTES. I want paid \$100,000,000 for my pain and Suffering. And the immediate Removal of the Beacon.
and Suffering. And the immediate Removal
of the Beacon.
SIGNED THIS <u>5</u> DAY OF <u>14</u> 20 <u>25</u> .
M. Morfus SIGNATURE OF PLAINTIFF